

ISDH 2004 Hospital Service Report

(Annual Report under Indiana Code 16-21-6)

Reid Hospital and Health Care ServicesCity: Richmond County: Wayne Year: **2004**

Provider Type: General Acute Hospital

I. Inpatient Care				
Hospital Service Description	Number of Set Up Beds	Number of Discharges	Number of Patient Days	Average Charge Per Discharge
Burn Care	0	0	0	\$0
Cardiac Intensive	8	236	1,326	\$4,555
ICU Med/Surg	10	859	2,862	\$2,968
ICU Neonatal	0	0	0	\$0
ICU Pediatric	0	0	0	\$0
Medical/Surgical	132	7,863	37,298	\$3,005
Neonatal Intermed	0	0	0	\$0
Obstetrics	16	949	2,345	\$1,685
Pediatric	17	943	3,545	\$2,697

Psychiatric	22	614	3,297	NR
Rehabilitation	20	286	3,078	\$6,438
Substance Abuse	17	355	4,339	\$7,028
Swing Beds	NA	0	0	\$0
Other Services	0	0	0	NA
Acute Subtotal	242	12,105	58,090	NA
Normal Newborn	22	792	1,684	\$1,493

II. Outpatient Visits			
Circulatory System	8,890	Digestive System	6,307
Endocrine System	6,234	Injuries and Poison	15,181
Mental Disorder	2,382	Musculoskeletal	13,458
Neoplasms	6,424	Nervous	4,017
Respiratory	9,325	Urinary	9,824
Other/Unknown	60,207	Total Visits	142,249
Number of Visits to Emergency Department			49,740
Percent of Emergency Department Visits of Total Visits			35.0%

Identification of Hospital Services

Each hospital has identified if it has one or more of a standard list of 66 services. This list of 52 services is updated annually by each hospital from the information initially requested by the Centers for Medicare & Medicaid Services when the hospital was initially certified for Medicare payment. The other 14 services have been identified in other sections of this report.

N - Ambulance Service (Owned)	Y - Alcohol/Drug Service	Y - Anesthesia Services
N - Audiology	Y - Blood Bank	N - Cardiac Cath Lab
Y - Cardiac-Thoracic Surgery	N - Chemotherapy Service	N - Chiropractic Service
N - CT Scanner	N - Dental Service	Y - Dietetic Service
N - Extracorporeal Lithotripter	N - Gerontological Service	Y - Home Health Service
Y - Hospice	Y - Laboratory Anatomical	Y - Laboratory Clinical
N - Magnetic Resonance (MRI)	Y - Neonatal Nursery	N - Neurosurgical Service
Y - Nuclear Medicine	Y - Occupational Therapy	Y - Operating Room
N - Ophthalmic Surgery	N - Optometric Service	N - Organ Bank
Y - Organ Transplant	N - Orthopedic Surgery	Y - Pharmacy
Y - Physical Therapy	N - PET Imaging	Y - Postoperative Recovery
N - Psychiatric Emergency	N - Psychiatric Child	N - Psychiatric Forensic
N - Psychiatric Geriatric	Y - Radiology Diagnostic	Y - Radiology Therapeutic
N - Reconstructive Surgery	Y - Respiratory Care	N - Rehab Inpat CARF
Y- Rehab Inpat Non CARF Acc	N- Rehab Outpatient	Y- Renal Dialysis

Y - Social Services	Y - Speech Pathology	Y - Surgical Inpatient
Y - Surgical Outpatient	N - Trauma Center Certified	N - Transplant Cnt Medicare
N - Urgent Care Center		

NA =	Not applicable	NMF =	No meaningful figure	NR =	Not reported
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